

State of Connecticut ~ Department of Developmental Services

Quality Service Review

August 8, 2011

To All Quality Service Review Web Based Data Application Users,

Please be aware that due to a change in the Centers for Medicare and Medicaid Services (CMS) waiver reporting requirements for all DDS waivers, some “Required for Follow-Up” designations in the web based “My QSR” data application will be changing **effective October 1, 2011.**

As Users are aware, there are currently a total of 35 indicators in the QSR system, when found “Not Met”, automatically require the service provider or DDS Case Manager to enter a Corrective Action Plan into the web based “My QSR” data application. When the above specified changes go into effect, there will be a **total of 32** indicators in the QSR system that will automatically require a “Corrective Action Plan (CAP)”. These changes to the “Required for Follow-Up” indicators ***do not change*** any of the current requirements regarding QSR Action Planning. All “Not Met” findings shall continue to be addressed by the service provider via the DDS Continuous Quality Improvement Plan (CQIP) and the service provider’s own quality assurance system(s). Any indicators that have been rated “Not Met” and have been designated as “Required for Follow-Up” will continue to require action planning within the web based “My QSR” data application. For “Not Mets” determined to be ongoing systemic issues or significant health or safety risks to the individual being reviewed, Users will continue to utilize the manual CAP process.

In an effort to maintain a reasonable Corrective Action Planning workload for service providers and DDS QSR business Users, please note that many of the current “Required for Follow-Up” indicators have been replaced rather than adding to what is currently in place.

A DDS Quality Management Services representative will be attending the upcoming Provider Leadership Forums in each of the regions and will be available for questions and discussions by the groups. It would be most helpful if each provider’s “QSR expert” could attend or forward any questions to the provider representative.

Any additional questions may be addressed by contacting the Quality Management Services division. Contact information is also available via the above DDS website.

Required For Follow-Up Indicators

Effective October 1, 2011

			CMS Reporting Indicator?	DDS Responsible?	Required for Follow-Up?
1.	D 1	The individual's plan indicates he or she directed or participated in the planning process to the extent that he or she chose to participate.	Yes	Always	Yes
2.	D 2	The Individual Plan is developed on a timely basis.	Yes	Always	Yes
3.	D 43a	The plan is implemented on a timely basis.	Yes	No	Yes
4.	D 4	The individual's preferences and personal goals are identified in his or her plan.	Yes	Always	Yes
5.	D 13	The individual's plan indicates he or she is working on chosen goals.	Yes	Always	Yes

6.	D 5a	The individual's record contains necessary and current health assessments, screenings, evaluations, reports and/or profiles.	Yes	Conditional	Yes
7.	D 5b	The individual's record contains necessary and current safety assessments, screenings, evaluations, reports and/or profiles.	Yes	Conditional	Yes
8.	D 5c	The individual's record contains necessary and current programmatic assessments, screenings, evaluations, reports and/or profiles.	Yes	Conditional	Yes
9.	D 9	The individual's plan identifies behavioral issues and strategies, as applicable.	Yes	Always	Yes
10.	D 10	The individual's plan identifies any supports that require coordination across settings.	Yes	Always	Yes
11.	D 16	The individual's choice of service options and support providers are reflected in his or her Individual Plan.	Yes	Always	Yes
12.	D 19	The individual's record indicates the case manager shared information with the person and his or her representatives and was supported to choose his/her service options, providers and degree of self-direction and management, as desired.	Yes	Always	Yes
13.	D 24	The Individual Plan identifies the supports the individual needs to manage his or her finances.	Yes	Always	Yes
14.	D 42	The individual's record documents that applications/redeterminations for Medicaid Title 19 and other entitlements and benefits have been processed.	Yes	Conditional	Yes
15.	D 43	Direct service providers maintain documentation of supports and services provided and progress made.	Yes	No	Yes
16.	D 43b	After the IP development, providers obtain needed assessments, screenings evaluations reports and/or profiles and/or follow-up on recommendations.	Yes	No	Yes
17.	D 44	The individual's plan identifies health and safety issues and strategies.	Yes	Always	Yes
18.	D 33	The Individual Plan documents responsiveness to the individual's requests to make changes in supports and services or providers, if applicable.	Yes	Always	Yes
19.	D 36	The Individual Plan identifies additional qualifications and training required for staff to adequately support the person, if needed.	Yes	Always	Yes
20.	D 48	For HCBS Waiver recipients, the Individual Plan HCBS Redetermination Form is complete and current.	Yes	Always	Yes
21.	D 15	Individual Progress Reviews identify that needed services and supports are received.	Yes	No	Yes
22.	D 20	The Individual Plan is modified based on changes in the individual's life goals or circumstances and preferences.	Yes	Always	Yes
23.	D 23	The individual's record contains necessary notifications.	Yes	Always	Yes
24.	D 45	The individual's record shows Abuse and Neglect policy and procedures were followed.	Yes	No	Yes
25.	D 46	The individual's record shows follow-up to Abuse and Neglect concerns regarding the individual, including notification to families.	Yes	Conditional	Yes
26.	D 7	All required medical assessments and appointments are current.	Yes	Conditional	Yes
27.	D 7a	The individual receives necessary oral and dental care including assessment, treatment and follow-up.	Yes	Conditional	Yes
28.	D 35	Support person training regarding the individual's health, safety, and plan is documented.	Yes	No	Yes
29.	D 37	There is documentation that at least one support staff on duty per shift is currently trained in cardiopulmonary resuscitation (CPR).	Yes	No	Yes
30.	D 38	There is documentation that only licensed personnel or certified unlicensed personnel administer medications to the individual.	Yes	No	Yes
31.	D 55	The support person has documented training regarding individual rights.	Yes	No	Yes
32.	D 56	The support person has documented training regarding abuse and neglect reporting and prevention.	Yes	No	Yes